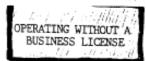
TOWN OF DAVIE 6591 S.W. 45 STREET DAVIE, FLORIDA 33314 (954)797-1112



HOME OCCUPATIONAL LICENSE APPLICATION

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed, return the application to the Occupational License division located at Town Hall.

APPLICANTS: COMPLETE BOTH SIDES OF APPLICATION 504023080240
BUSINESS NAME: GCOLINK, LLC
BUSINESS STREET ADDRESS: 12560 SW 34 TH PLACE, DAVIE ZIP 33330-1252
BUSINESS MAILING ADDRESS: PO BOX 552890 FORT-LAUDERDAGE ZIP 33355-2890
BUSINESS PHONE: 954-557-7196
DESCRIBE TYPE OF BUSINESS: PURCHASING AGENCY
BUSINESS IS: Corporation Sole Proprietor Partnership
Owner/Officer (s) Home Address City/Zip Phone#
1. ESTHER C. CHAUVET 12560 SW 34 TH PLACE DAVIE 33330 954-557-7196
2
Federal ID Number or Social Security Number_
Lunderstand that this is an application for a home occupational license in the Town of Davie and I may not conduct any business at this location until I have received the license itself. I further understand that this license upon issuance, is valid until September 30, 2003, and must be renewed before October 1st.
This application for home occupational license allows mail and telephone use only no signs or exterior storage, no on-site employees are permitted.
Print Owner or Officers Name and Title Signature of Owner or Officer,
Office Use Only: Date 4 Procategory OCHOO Fee SS.13 Rec# New Trans
halftee 2757
Council approval Required Yes No Zoning Approval AR Date 415/02 Council
Town Council Date Approved Denied
Tabled To Approved Denied
OCCUPATIONAL LICENSE DEPARTMENT APPROVAL
9/00 OWNED SIGNATURE REQUIRED ON BACK OF ARRUPATION